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L4 ANSWER 23 OF 26 CANCERLIT
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TI MAPPING THE ANTIGENIC REGIONS OF EPSTEIN-BARR NUCLEAR ANTIGEN USING SYNTHETIC PEPTIDES.
AU Rhodes G; Houghten R A; Carson D A; Valbracht J; Vaughan J H
CS Scripps Clinic and Research Foundation, La Jolla, CA 92037.
SO UCLA Symp Mol Cell Biol, (1984). New Ser 21, pp. 487-96.
DT (MEETING PAPER)
FS ICDB
LA English
EM 198604
AB The viral DNA encoding for the Epstein-Barr nuclear antigen (**EBNA**) contains a repeating sequence that is expressed as a run of over 200 amino acids consisting only of glycine and alanine. The authors synthesized nine peptides from the middle, ends, and outside of this repeating region of the protein; six of these peptides were used to detect antibodies to **EBNA** in human sera. Antipeptide activities of specimens of human sera were measured with the aid of an enzyme-linked assay in microtiter plates. No sera of 27 individuals who were Epstein-Barr viral capsid antigen (VCA) negative reacted against any of six peptides used in the assay; in contrast, all VCA+ samples reacted with the peptides, the highest recognition generally occurring with the peptides containing all glycine and alanine. IgG antibody titers to the peptides in patients with acute and convalescent mononucleosis rose in conjunction with those directed against **EBNA**. When tested at a dilution of 1/320, sera of rheumatoid arthritis patients had antibody levels higher than those for normal subjects, for every peptide tested; systemic **lupus** erythematosus patients had an average titer higher than that for normal subjects, only for the glycine-alanine-containing peptides. Antibody titers of sera from Sjorgren syndrome and progressive systemic sclerosis patients had titers that did not differ from those of normal subjects. Sera with high titers to **EBNA** recognized some of the peptide sequences better than others; this finding implies that human antibodies to **EBNA** are directed at selected portions of the protein. Further studies of peptides should provide a method of mapping the antigenic determinants. (12 Refs)

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ACCESSION NUMBER: 97104028 EMBASE
DOCUMENT NUMBER: 1997104028
TITLE: Immunoblotting reactivity of sera from patients with **autoimmune** connective tissue diseases against Epstein-Barr nuclear antigen (EBNA) polypeptides.
AUTHOR: Ngou J.; Segondy M.
CORPORATE SOURCE: M. Segondy, Laboratoire de Virologie, Hopital Saint-Eloi, Centre Hospitalier Universitaire, 34295 Montpellier Cedex 5, France
SOURCE: Serodiagnosis and Immunotherapy in Infectious Disease, (1996) 8/2 (105-108).
Refs: 21
ISSN: 0888-0786 CODEN: SIIDE3
PUBLISHER IDENT.: S 0888-0786(96)01059-1
COUNTRY: Netherlands
DOCUMENT TYPE: Journal; Article
FILE SEGMENT: 004 Microbiology
026 Immunology, Serology and Transplantation
LANGUAGE: English
SUMMARY LANGUAGE: English

AB The **antibody** responses to Epstein-Barr nuclear antigen (EBNA) polypeptides were analyzed by immunoblotting in 93 patients with **autoimmune** connective tissue diseases (ACTD) in comparison with 50 clinically healthy control subjects. **Antibody** frequencies to EBNA-2, -4, and -6 were significantly higher in patients than in controls.

Among the patients with ACTD, those with systemic lupus erythematosus (SLE) showed a significant increase in the frequency of anti-EBNA-3 **antibodies**. These results confirm the particularity of the **antibody** responses against **Epstein-Barr virus** (EBV) polypeptides in patients with ACTD; they could either reflect basic immune disturbances or suggest a participation of EBV in the pathogenesis of the disease.

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DOCUMENT NUMBER: 1994084024

TITLE: Soluble Fc.epsilon.RII/CD23 in patients with **autoimmune** diseases and **Epstein-Barr virus**-related disorders: Analysis by ELISA for soluble Fc.epsilon.RII/CD23.

AUTHOR: Yoshikawa T.; Nanba T.; Kato H.; Hori K.; Inamoto T.; Kumagai S.; Yodoi J.

CORPORATE SOURCE: Department of Biological Responses, Institute for Virus Research, Kyoto University, 53 Shogoin-Kawahara-cho, Sakyo, Kyoto 606-01, Japan

SOURCE: ImmunoMethods, (1994) 4/1 (65-71).
ISSN: 1058-6687 CODEN: IMUME8

COUNTRY: United States

DOCUMENT TYPE: Journal; Article

FILE SEGMENT:
004 Microbiology
005 General Pathology and Pathological Anatomy
026 Immunology, Serology and Transplantation
029 Clinical Biochemistry
048 Gastroenterology
037 Drug Literature Index

LANGUAGE: English

SUMMARY LANGUAGE: English

AB The low-affinity Fc receptor for IgE (Fc.epsilon.RII/CD23) and its soluble form (sCD23, IgE-binding factor) have multiple functions, and enhanced levels of these are associated with various immunological diseases. We established two sensitive ELISA systems using enzyme-conjugated mAb and biotinylated mAb. The detection limits of the ELISA systems were 0.03 and 1.0 ng/ml, which showed good correlation in the range 1.0-10 ng/ml. In the ELISA system using enzyme-conjugated mAb, the average sCD23 concentration in 303 normal healthy volunteers was 1.4 .+-. 0.3 ng/ml. In the ELISA system using biotinylated mAb, sCD23 levels in normal healthy volunteers showed almost the same values. In patients with **autoimmune** diseases such as rheumatoid arthritis, systemic lupus erythematosus, Sjogren syndrome, progressive systemic sclerosis, and mixed connective tissue disease, the sCD23 levels were significantly higher than those in normal individuals. Furthermore, in **Epstein-Barr virus**-related disorders after liver transplantation with immunosuppression, plasma levels of sCD23 rapidly increased to more than 12 ng/ml when clinical symptoms were evident. In addition, the sCD23 values remained high, although elevated GOT levels gradually decreased to standard values and EBV hepatitis improved. These data suggest that sCD23 levels are a sensitive marker of **autoimmune** diseases and EBV-related disorders in addition to allergic disorders. The ELISA system for sCD23 may be an additional **diagnostic** tool in estimating the clinical courses of these diseases.